NONPROVISIONAL PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

QLIFF & BERRIDGE, PLC P.O. Box 19928 Alexandria, Virginia 22320 Telephone: (703) 836-6400

Attorney Docket No.: 117205

Date: September 17, 2003

Facsimile: (703) 836-2787 MAIL STOP PATENT APPLICATION

NONPROVISIONAL APPLICATION TRANSMITTAL **RULE §1.53(b)**

Commissioner for Patents

P.O. Box 1450

Sir:

Alexandria, VA 22313-1450

Customer Number: 25944

Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application

For (Title):	INTERNET TELEPHONE SYSTEM	-	•
By (Inventors):		Tokunori KATO, Tetsuya OUCHI	_	
	Use Figure A Declaration a This application (A Preliminary This patent appl The execut An Information Entitlement to s A Preliminary Priority of forei A certified This application the invention d country, or under	is (Figs. 1-21; 21 sheets) are attached for front page of Publication. Ind Power of Attorney is filed herewith. In claims benefit of Provisional Application No filed Amendment is attached to reflect this claim in the Specification if not already present.) Idication is assigned to BROTHER KOGYO KABUSHIKI KAISHA. The dead of the Assignment is filed herewith. Disclosure Statement is filed herewith. The mall entity status is hereby asserted. The mandment is filed herewith. The property of the above corresponding foreign application(s) is filed herewith. The is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby cert is closed in this application has not been and will not be the subject of an application filed in the annulational agreement, that requires publication at eighteen months after filing.	tifies th	
\boxtimes	ine filing fee is	calculated below:		

CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE

FOR:	NO. FILED	NO. EXTRA			
BASIC FEE					
TOTAL CLAIMS	20 - 20	= 0*			
INDEP CLAIMS	2 - 3	= 0*			
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED					
* If the difference is less than zero, enter "0".					

SMALL ENTITY					
RATE	FEE	<u>OR</u>			
	\$ 375	<u>OR</u>			
x 9=	\$	<u>OR</u>			
x 42 =	\$	<u>OR</u>			
+ 140 =	\$	<u>OR</u>			
TOTAL	\$	<u>OR</u>			
lling fee is attached. Except as					

OTHER THAN A **SMALL ENTITY**

:	RATE	FEE	
		\$ 750	
:	x 18	\$	
:	x 84	\$	
	+ 280	\$	
	TOTAL	\$ 750	

 \boxtimes Check No. 146390 in the amount of \$750.00 to cover the fi s otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

s A! Oliff Registration No.

Joel S. Armstrong Registration No. 36,430